

**Résultats.**– Il s'agit de 214 patients dont 114 hommes et 100 femmes. La dépression est présente chez 56,1 % des patients, les femmes sont plus touchées que les hommes ( $p < 0,05$ ). De même les sujets de plus de 70 ans sont plus exposés ( $p < 0,001$ ). La dépression est d'autant plus sévère que l'autonomie dans les activités de la vie quotidienne s'en trouve limitée ( $p < 0,0001$ ). Des relations significatives ont été retrouvées entre la dépression et la présence de dysfonctionnements urinaires ( $p < 0,05$ ), de troubles orthopédiques ( $p < 0,05$ ) ou d'altérations cognitives. Une corrélation entre la dépression et la présence de troubles sexuels est établie ( $p < 0,0001$ ).

**Discussion et conclusion.**– La dépression a été retrouvée dans 56,1 % des cas. Ce résultat se trouve dans le large intervalle rapporté dans la littérature. La sévérité du handicap et l'altération de certaines fonctions sont autant d'éléments favorisant et/ou aggravant la survenue de la dépression chez les hémiplegiques vasculaires.

<http://dx.doi.org/10.1016/j.rehab.2013.07.049>

## English version

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### Functional prognosis of patients suffering from stroke, living at home followed by the Fann Hospital and the department of Physical Medicine and Rehabilitation in Dakar (Senegal)

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**Keywords:** Stroke; Prognostic; Functional; Dakar; Senegal

**Introduction.**– The study of the prognostic factors after stroke shows discordance in some of them.

**Objectives.**– The aim of our study was to identify the prognostic factors of functional outcome among stroke patients, living at home.

**Methods.**– We led a transversal study in the Department of Neurology and the department of Physical Medicine and Rehabilitation at the University Hospital of Fann in Dakar. We included confirmed stroke victims, living at home, and received consultation between April and July 2012. We collected with a preset documentation: biographic data, disabilities, the nature of the relationship with the peers, the Barthel index, the nature and location of injuries and treatment received. Recurrent and/or unconfirmed stroke were excluded.

**Results.**– We collected 50 patients aged between 37 and 78 years. The sex ratio was 1/1. The average age was 58.1 years. The mean duration of stroke was 11 months. Barthel score was greater than 60 in 85% of patients younger than 55 years while it was 50% in patients older than 55 years. All patients reported an improvement of relations with peers (eight cases) were autonomous. Patients with right lesions were independent in 75.75% of cases, whereas those with left injuries were 56.25%.

**Discussion.**– Young age, familial assist, constitute good prognostic factors after stroke [2,3]. Held and al, found that left hemispheric lesions were associated with a good recuperation [1] but in our study, we found the contrary.

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<http://dx.doi.org/10.1016/j.rehab.2013.07.050>

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### Stroke in diabetic patients: A retrospective study of 688 cases

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**Keywords:** Ischemic stroke; Diabetes

**Introduction.**– Diabetes is a complex endocrine pathology, known as a proven risk factor for the occurrence of major vascular events. Its impact on the evolution and prognosis of ischemic stroke (IS) remains a matter of controversy.

**Aim.**– We propose to study the epidemiological, clinical, prognostic and evolutive particularities of the occurrence of stroke in diabetic patients.

**Method.**– A retrospective study conducted at the Department of Neurology of Monastir from 1993 to 2010. We included all patients hospitalized or followed in our outpatient department for IS, with diabetes previously known or diagnosed during hospital stay. The data were analyzed by SPSS 17.0.

**Results.**– Among 1713 patients, 688 had diabetes, 85 insulin-dependent. Mean patient age was 64 years with a sex ratio M/F of 1. The diagnosis of diabetes was concomitant to the IS in 182 patients. Vascular risk factors associated with diabetes were hypertension (70%), dyslipidemia (21%) and smoking (16%). Degenerative complications were found in 87 patients. Deep infarcts in the territory of sylvian artery were the most frequent ( $n = 296$ ; 43%). One in ten patients relapsed. 23 patients died in the acute phase of the IS.

**Discussion.**– According to our study, diabetes is associated with IS in 40% of cases. This rate is variable in the literature, depending on the population studied. The comorbidity IS-diabetes is characterized by the frequent association with other vascular risk factors ( $P < 10^{-3}$ ) and a high mortality rate ( $P = 0.03$ ) without having a real effect on the clinical course.

**Conclusion.**– Diabetes in patients experiencing IS should alarm the clinician to take more precautions and act appropriately on modifiable vascular risk factors to reduce mortality and disability.

<http://dx.doi.org/10.1016/j.rehab.2013.07.051>

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### Return to work after transient ischemic attack or an ischemic stroke: A study of associated factors in cohort of patients from Amiens

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**Keywords:** Return to work; Stroke; Associated factors; Physical medicine

**Introduction.**– The stroke (a.k.a. CVA) is a pathology liable to affect subjects who are old enough to work – a quarter of its victims are less than 60-years-old. Clinical consequences, and most particularly neuropsychological ones, may hinder those wishing to get back to work and have a major impact on individuals and on health spending. The main purpose of this study is to ascertain whether there are factors linked with return to work, so as to refer those patients to the most appropriate unit.

**Methods.**– Our survey was conducted at a set moment among 181 in-patients aged less than 60 and admitted to the Neuro-Vascular Unit at the Amiens University Hospital in 2010 or in 2011. In May 2012, they were sent a questionnaire after which we were able to gather socio-demographic, professional, clinical and MRI data. One hundred and six working patients – 82 with an ischemic stroke and 24 with a transient ischemic attack – eventually answered the questionnaire.

**Results.**– Sixty-three percent of the patients had returned to work 101 days on average after their stroke. We managed to identify many factors linked with their return to work: unspecified etiology, length of stay, NIHSS scores and Rankin scales at discharge, and even clinical predictors that are often deemed subjective. Moreover we found out that their consulting the occupational health department significantly increased their chances to go back to work. Thanks to a multivariate analysis we were then able to pinpoint three variables: the initial NIHSS score ( $P < 0.001$ ), the patients' depressive state long after their stroke ( $P = 0.003$ ) and their going back to driving. Finally we were surprised by the occupational difficulties encountered by some patients with Transient Ischemic Attack.

**Conclusions.**– Our study suggests that multifarious links to a return to work may be implied. The poststroke rehabilitation phase is by no means insignificant in

the undertaking to totally reimburse a patient's medical expenses and to ensure his/her well-being. All this means involving different doctors and probably contemplating new approaches in which the Physical and Rehabilitation Medicine doctor has a central role.

<http://dx.doi.org/10.1016/j.rehab.2013.07.052>

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### Interaction between postural and cognitive performances in right brain damaged patients: A dual task study



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**Keywords:** Postural control; Dual-tasking; Attention; Stroke

**Background.**– The control of dual-tasking effects is a daily challenge in stroke neurorehabilitation [1]. It may be one of the reasons explaining that patients have a poor functional prognosis after a stroke in the right brain hemisphere, which plays a dominant role in postural control [2]. The purpose of this study was to explore cognitive motor interference (dual task) in right-brain damaged patients after stroke.

**Methods.**– Thirty right brain damaged patients and 12 healthy subjects performed three different tasks while maintaining a standing position: a control task, a simple attentional task and a complex attentional task. We measured the sway area of the participants on a force platform, including the center of pressure and its displacements.

**Results.**– Our results showed that stroke patients demonstrated a reduced postural sway compared to healthy subjects, who were able to maintain their posture while performing a concomitant attentional task in the same dual-tasking conditions. Moreover, in both groups, the postural sway decreased with the increase in the attentional load of cognitive tasks. We also found that the stability of stroke patients in dual-tasking conditions increased together with the transfer of the body weight towards the right side, especially when the attentional load of the cognitive tasks and the lower limb motor impairments were high.

**Discussion.**– These results suggested that stroke patients and healthy subjects adopted a similar postural regulation strategy aimed at maintaining stability in dual-tasking conditions involving a static standing position and different attention-related cognitive tasks. Our results confirmed the implication of attention processes in static postural control in right brain damaged patients.

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<http://dx.doi.org/10.1016/j.rehab.2013.07.053>

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### Neglect syndrome in poststroke: Prospective study about 108 cases



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**Introduction.**– The neglect syndrome (NS) constitutes a disorder of space cognition frequently observed after cerebral vascular injury. This disorder constitutes a predictive factor of functional poor prognosis.

**Objectives.**– The objective of this study is to identify this syndrome and to seek possible correlations with other functional disorders and the gravity of the disability in hemiplegics stroke victims.

**Methodology.**– Transverse exploratory study which took place in the MPR service of the CHU of Oran during the year 2011. It concerned right-handed adult patients with a stroke. This syndrome present was considered when the patients are positive at least to one of the following tests: the test of stopping of lines of Albert, the test of stars of Halligan, the test of the bells of Gauthier and the test of Catherine Bergego. The autonomy of the patients was evaluated by indexes of Barthel and the depression through the scale of Beck.

**Results.**– They are 108 patients, including 49 women and 59 men. The NS was present among 36 patients (33%). The age, the sex and the type of stroke did not have an influence on the frequency at which this syndrome occurred. Whereas, the subjects having presented a state of coma were more candidates to make a NS ( $P < 0.001$ ). The subjects presenting a NS had an autonomy (Barthel) limited ( $P < 0.001$ ). The presence of this syndrome is correlated with the difficulties of preparing ( $P < 0.001$ ), with the disturbances of the function of ambulation, the presence of disorders of the sensitivity ( $P < 0.001$ ). It was also noted the pejorative character of the depression.

**Discussion and conclusion.**– The NS is frequent and constitutes a poor prognostic factor which delays functional recovery and makes more severe the situation of disability in hemiplegics stroke victims. It is important to admit these disorders in order to be able to propose an adapted and early therapy.

<http://dx.doi.org/10.1016/j.rehab.2013.07.054>

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### Multidisciplinary team for post stroke patient: To bring MPR expertise to many patients



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**Keywords:** Multi disciplinary team stroke rehabilitation; Care pathway

**Objective.**– In Haute Vienne, there is only one unit of physical medicine and rehabilitation (MPR) for the post-stroke patients. It is essential to have a PMR approach in all the departments for these patients, which is why we created in September 2010 a multidisciplinary mobile team for post-stroke outpatients (HEMIPASS), unit of MPR, university hospital (CHU) of Limoges. The objective of the first year was to introduce this team in order to enlarge the recruitment of patients.

**Methods.**– We compared activity of 2011 and 2012. We are particularly concerned at the origin of the requests and have made a comparison between the first two years of activity in order to see the evolution of recruitment.

**Results.**– In 2012, the HEMIPASS team has examined 115 requests of taking care. Compared to 2011, we observed a diversification of the origin of requests. There was an increase of requests from outside the CHU 39% vs 24%. For requests from the CHU, requests from Neurology increased strongly by 7 to 26%. However, the MPR unit remained at the origin of the largest number of requests (35%). Therefore, 65% of the requests concerned patients who had not had MPR evaluation.

**Conclusion.**– The mobile team allows to bring the MPR expertise to many patients who without it would have had no access. It is an opportunity to propose home-based rehabilitation and a specific follow-up with sequelae-specific treatments.

<http://dx.doi.org/10.1016/j.rehab.2013.07.055>

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### Hallucinations and cortical blindness after peduncular hematoma



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